

POSITION	INITIALS	ID NO.	DATE
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**FEE DETERMINATION**  
**O.I.P.E. CLASSIFIER**  
**FORMALITY REVIEW**  
**RESPONSE FORMALITY REVIEW**

### INDEX OF CLAIMS

✓ Rejected N Non-elected  
 = Allowed I Interference  
 - (Through numeral) Canceled A Appeal  
 : Restricted 0 Objected

Claim	Date
Final	
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If more than 150 claims or 10 pages  
 staple additional sheet(s).

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